

ASSURANCE OF COMPLIANCE EQUAL EMPLOYMENT OPPORTUNITY CITY OF SAN ANTONIO MAY 1994

The bidder,	•			~~~~			·,	hereafter	known	as
"contractor,"	as a par	t of th	e procedure	for the	submission	of bids	on	a project	known	as
							a	grees to th	e follow	ing
conditions if	awarded a	contra	ct by the City	y of San	Antonio, her	eafter kn	owi	as City, o	n the abo	ove
named projec	t.				•		٠.			

- 1. The Contractor will not discriminate in any personnel action including hiring, promotion, suspension, termination, sick leave, work assignments, holidays and vacation on the basis of race, color, religion, national origin, sex, age, handicap, or political belief or affiliation.
- 2. The contractor will maintain a copy of its Affirmative Action Plan for Equal Employment Opportunity and will provide upon request to the City of San Antonio.
- 3. The Contractor agrees to provide the City with whatever information may be requested by the Affirmative Action Planning Section for the purpose of monitoring compliance with Contractor's affirmative action requirements.
- 4. The Contractor agrees to attempt to fill newly created positions with qualified persons, so that the Sex and Ethnic ratios approximate the ratios of the Civilian Labor Force as determined by the applicable U. S. Census Data for job classifications similar to those jobs created by the proposed contract.
- 5. The Contractor agrees to update its Affirmative Action Plan annually or as required by the City, taking into consideration changes in the Civilian Labor Force and the Contractor's needs to insure non-discrimination and affirmative action relevant to employment.

It is understood that failure to comply with any of these conditions may constitute a violation of the contract between the Contractor and the City and may result in termination of the contract and/or the barring of the Contractor from future contracts with the City.

FOR THE CONTRACTOR	
	799-1
NAME	
SIGNATURE	
TITLE	•



CERTIFICATION OF NONSEGREGATED FACILITIES

	certifies that	h
does not and will not maintain or	provide for his employees any segregated facilities at any of	f hi
establishments, and that he does	not and will not permit his employees to perform their service	es a
any location, under his control, wh	ere segregated facilities are maintained.	
	Ciana CDilla Danasa Ani	
	Signature of Bidder's Representative	
	Typed or Printed Name and Title of	
	Bidder's Representative	

STATEMENT ON PRESIDENT'S EXECUTIVE ORDERS

The	undersigned	bidder	(has)	(has not)	previously	performed	work su	bject to	the
Pres	sident's Execu	tive Ord	ers Nos.	11 24 6 and 11	1375 or any	preceding si	milar exe	cutive or	ders
(No	s. 10925 and	11114).							
				Name of B	idder				
				Signature o	of Bidder's R	Lepresentativ	/e		
				W					
				~ 4	rinted Name epresentative		f		

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

1. Type of Federal Action: a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal A a. bid/offer/appli b. initial award c. post-award		3. Report Type: a. initial filing b. grant For Material Change Only: year quarter date of last report
4. Name and Address of Reporting Entity:		5. If Reporting Enti Enter Name and Addr	ty in No. 4 is Subawardee, ess of Prime:
Prime Subawardee Tier Congressional District, if known:	_, if known:	Congressional Distri	ct, if known:
6. Federal Department/Agency:		7. Federal Program I	Name/Description:
	Þ	CFDA Number, if app	ilicable:
8. Federal Action Number, if known:		9. Award Amount, if	f known:
		\$	
10. a. Name and Address of Lobbying Entity (if individual, last name, first name, MI):	,	b. Individuals Perform from No. 10a) (last na	ning Services (including address if different me, first name, MI):
(attach Continuation Sheet(s) SF-LLL-A, if no	ecessary)		
11. Amount of Payment (check all that apply)):	13. Type of Payment (check all that apply):
\$ actua	al planned	b. one-time fee c. commission	
12. Form of Payment (check all that apply) a. cash		d. contingent fee e. deferred	,
b. in-kind: specify: nature value			
14. Brief Description of Services Performed of officer(s), employee(s), or Member(s) contact			ling
(attach Continuation Sheet(s) SF-LLL-A, if no	ecessary)		
15. Continuation Sheet(s) SF-LLL-A attack	hed:	Yes	No
16. Information requested through this form if 31 U.S.C. section 1352. This disclosure of lot material representation of fact upon which relithe tier above when thi transaction was made disclosure is required pursuant to 31 U.S.C. It will be reported to the Congress semi-annually for public inspection. Any person who fails to closure shall be subject to a civil penalty of no and not more than \$100,000 for each such fail	bbying activities s a iance wasplaced by or entered into. This 352. This information y and will be available of file the required disput less than \$10,000	Print Name:	Date:
FEDERAL USE ONLY			Authorized for Local Reproduction Standard Form - LLL

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- Identify the type of covered Federal action for which lobbying activity is and/or has been secure to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to
 the information previously reported, enter the year and quarter in which the change occurred. Enter the date of
 the last previously submitted report by this reporting entity or this covered Federal action.
- 4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressiona District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
- Enter the name of the Federal agency making the award or loan commitment. Include at least one
 organizational level below agency name, if known. For example, Department of Transportation, United States
 Coast Guard.
- Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- 8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; invitation for Bid (IFB) number; grant announcement number, the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
 (b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
- Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
- 12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
- 13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
- 14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
- 15. Check whether or not a SF-LLL-A continuation Sheet(s) is attached.
- 16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burdon for this collection of infromation is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments reguarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burdon, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

CONTINUATION SHEET

Reporting Entity:		Page _	of	
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CITY OF SAN ANTONIO CHILD SUPPORT STATEMENT

Onder Family Code, Section 231.000,	(name or
individual) certifies that	(name of business)
(vendor #) as of	
(date) is eligible to receive a grant, loan, or payment and acmay be terminated and payment may be withheld if this cert	knowledges that any contract
List below the name and social security number of the indi- partner, shareholder, or owner with an ownership interest entity submitting the bid or application. This form must	of at least 25% of the business
obtains a 25% ownership interest in the business entity.	
, ,	Social Security Number
obtains a 25% ownership interest in the business entity.	Social Security Number
obtains a 25% ownership interest in the business entity.	Social Security Number
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obtains a 25% ownership interest in the business entity.	Social Security Number

Family Code, Section 231.006, specifies that a child support obligor who is more than thirty (30) days delinquent in paying child support and a business entity in which the obligor is a sole proprietor, partner, shareholder, or owner with an ownership interest of at least 25% percent is not eligible to receive payments from state funds under a contract to provide property, materials, or services; or receive a state-funded grant or loan.

A child support obligor or business entity ineligible to receive payments described above remains ineligible until all arrearage have been paid or the obligor is in compliance with a written repayment agreement or court order as to any existing delinquency.

Except as provided by Family Code, Section 231.302(d), a social security number is confidential and may be disclosed only for the purposes of responding to a request for information from an agency operating under the provisions of Subchapters A and D of Title IV of the federal Social Security Act (42 U.S.C. Sections 601 et seq. and 651 et seq.)

The City of San Antonio maintains the information collected through this article. With few exceptions, you are entitled on request to be informed about the information that we collect about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you also are entitled to receive and review the information. Under Section 559.004 of the Government Code, you are also entitled to have us correct information about you that is incorrect.

> Please send this form to City of San Antonio, Public Works Department, Capital Improvement Programs, Fiscal Section, P.O. Box 839966, San Antonio, Texas 788283-3966.



Certification of Non-Collusion

"The undersigned affirms that they are duly authorized to execute the proposed contract, that this company, corporation, firm, partnership or individual has not prepared this Bid in collusion with any other Bidder, and that the contents of this Bid as to prices, terms or conditions of said Bid have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this Bid.

By:
(Print or Type Name)
(Print or Type Title/Position with Business)
(Signature)
(Date)



CERTIFICATION OF INTEREST IN OTHER BID PROPOSALS FOR THIS WORK

By signing this proposal, the bidding firm and the signer certify that the following information, as indicated by checking "Yes" or "No" below, is true, accurate, and complete.

Quotation(s) have been issued in this firm's name to other firm(s) interested in this work for consideration for performing a portion of this work.
YES
NO

- B. If this proposal is the low bid, the bidder agrees to provide the following information prior to award of the contract.
 - 1. Identify firms which bid as a prime contractor and from which the bidder received quotations for work on this project.
 - 2. Identify all the firms which bid as a prime contractor to which the bidder gave quotations for work on this project.



Section 00440 LITGATION DISCLOUSRE FORM

The attached Litigation Disclosure Form will be completed and submitted with the bid for the construction of this project.

LITIGATION DISCLOSURE

Failure to fully and truthfully disclose the information required by this Litigation Disclosure form may result in the disqualification of your bid from consideration or termination of the contract, once awarded.

		<u>`</u>		
1.	Have you or any member indicted or convicted of a	er of your Firm or felony or misdemean	Ceam to be assigned to a cor greater than a Class C	this engagement ever been in the last five (5) years?
	Circle One	YES	NO	
2.		for the City of Sa		tuse or otherwise) from any r Federal, State or Local
	Circle One	YES	NO ·	
3.	Have you or any member City of San Antonio or an last ten (10) years?	r of your Firm or Te ny other Federal, Sta	am been involved in any e or Local Government,	claim or litigation with the or Private Entity during the
	Circle One	YES	NO	
pė tei	erson(s), the nature, and t	the status and/or ou ation, as applicable	tcome of the information Any such information	dicate the name(s) of the n, indictment, conviction should be provided on a
T(O THE BEST OF MY KNO	WLEDGE, THE AE	OVE INFORMATION IS	S TRUE AND CORRECT.
Co	ompany Name:		· ·	
Si	gnature of Principal:	_		
Pr	inted Name of Principal:	_		
Ti	tle of Principal	<u>-</u>		
	•			

	Print Firm Name
	Signature/Title
Before me, the undersigned authority, a Notar	ry Public on this personally appeared
Who being by me duly sworn upon oath says of	that she/he is qualified and authorized to make affidavit for and on behali
Bidder of	County and is fully cognizant of the facts herein set
out and affirms to the truth and accuracy of the	County, and is fully cognizant of the facts herein set ne certifications made herein by signing the documents above.
out and affirms to the truth and accuracy of the Subscribed and sworn before me by the said	
Subscribed and sworn before me by the said	·
Subscribed and sworn before me by the said this day of	Name
Subscribed and sworn before me by the said	Name

Control					
Project_	Mission	Trails	IV &	V	
Highway					
County	Bexar				

ADDENDUM ACKNOWLEDGMENT

Each bidder is required to acknowledge receipt of an addendum issued for a specific project. This page is provided for the purpose of acknowledging an addendum.

FAILURE TO ACKNOWLEDGE RECEIPT OF AN ADDENDUM WILL RESULT IN THE BID NOT BEING READ.

In order to properly acknowledge an addendum the date which appears on the top of the addendum notification letter must be entered below.

ADDENDUM NO. 1 DATED:	
ADDENDUM NO. 2 DATED:	
ADDENDUM NO. 3 DATED:	
ADDENDUM NO. 4 DATED:	
ADDENDUM NO. 5 DATED:	

In addition, the bidder by affixing their signature to the signature page of the proposal is acknowledging that they have taken the addendum(s) into consideration when preparing their bid and that the information contained in the addendum will be included in the contract, if awarded by the Commission or other designees.